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Complete if Known Substitute for form 1449/PTO **Application Number** INFORMATION DISCLOSURE Filing Date TBA 🗵 First Named Inventor STATEMENT BY APPLICANT Watts (Use as many sheets as necessary) **Art Unit** TBA **Examiner Name TBA** Sheet of 1 1 5647-001 Attorney Docket Number

Examiner	Cito	. Document Number	U. S. PATENT DO Publication Date	Name of Patentee or	Pages, Columns, Lines, Where
Initials*	Cite No.1	Number-Kind Code ^{2 (if known)}	MM-DD-YYYY	Applicant of Cited Document	Relevant Passages or Relevant Figures Appear
	Α	US- 6,546,977	04-15-2003	Paumier	
	В	US- 6,375,106	04-23-2002	Sears	
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		FOREIGN	PATENT DOCU	MENTS		
Examiner Initials*	No 1	Foreign Patent Document	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear	T ⁶
		Country Code ³ –Number ⁴ Kind Code ⁵ (if known)				
	D	DE 296 02 918	04-25-1996	Falinbuegi		
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